


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000043260 1. Entity Name GENERAL REMODELING & SERVICES, INC.	
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Principal Place of Business 7251 NE 2ND AVE PLACE #9 MIAMI, FL 33138	Mailing Address 7251 NE 2ND AVE PLACE #9 MIAMI, FL 33138
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DO NOT WRITE IN THIS SPACE

01172005 No Chg-P CR2E034 (10/03)

4. FEI Number 57-1169694	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HOLZNER, CARLOS A 7251 NE 2ND AVE PLACE #9 MIAMI, FL 33138	DO NOT WRITE IN THIS SPACE
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP HOLZNER, CARLOS A 7251 NE 2ND AVE PLACE #9 MIAMI, FL 33138
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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 03/14/05-80102-004 150.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee and I was required to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/05 _____
Date

Daytime Phone # _____